

DEPARTMENT OF LOCAL GOVERNMENT FINANCE  
LOCAL GOVERNMENT TAX CONTROL BOARD  
HEARING INFORMATION SHEET

TOWNSHIP EMERGENCY LOAN  
(IC 36-6-6-14), (IC 12-20-24)

TOWNSHIP: \_\_\_\_\_  
POPULATION: \_\_\_\_\_

COUNTY: \_\_\_\_\_  
POPULATION: \_\_\_\_\_

Complete all sections of this Information Sheet to expedite review of your request. Incomplete submissions will be returned. Returned forms will require the unit to again petition the Department of Local Government Finance for determination. Please refer to IC 36-6-6-14 (Fire Funds) and IC 12-20-24 (Township Assistance Fund) for statutory requirements for this request.

GENERAL

1. This loan request is for (check one):

☐ Township Assistance

Amount: \$ \_\_\_\_\_

☐ Fire

Amount: \$ \_\_\_\_\_

2. Describe the emergency:

3. On what date did the Township Board resolve that it would be necessary to incur debt? \_\_\_\_\_  
(Attach a copy of the resolution).

4. How can the need for emergency loans be avoided in the future?

TERMS OF THE LOAN

1. State the maximum number of years for repayment approved by the Township Board. \_\_\_\_\_ years
2. How many banks were contacted for interest quotes: \_\_\_\_\_
3. State the interest rate that is anticipated to be charged: \_\_\_\_\_%

**TAX RATE**

1. Is a tax rate anticipated to repay the debt? (Y) (N)
2. In what taxing year will taxes first be levied for repayment of this loan? 20\_\_\_\_ Pay 20\_\_\_\_
3. Statutory Debt Limit:

Current Year Assessed Valuation \$ \_\_\_\_\_ / 3 X (.02) = \$ \_\_\_\_\_  
\_\_\_\_\_ Civil Assessed Valuation \_\_\_\_\_ Fire Assessed Valuation

If the request is for fire protection purposes, use the certified fire assessed valuation, otherwise, use the unit civil assessed valuation

4. Indicate the anticipated tax rate by completing the calculation:
  - a) First Year of Repayment requiring rate: 20\_\_\_\_ Pay 20 \_\_\_\_\_
  - b) Estimated Assessed Value \$ \_\_\_\_\_
  - c) Annual Payment \$ \_\_\_\_\_
  - d) Less Distributive Shares \$ \_\_\_\_\_
  - e) Less Estimated Excise Tax \$ \_\_\_\_\_
  - f) Less Estimated Financial Institutions Tax \$ \_\_\_\_\_
  - g) Estimated Levy ( c-d-e-f) \$ \_\_\_\_\_
  - h) Estimate Tax Rate (g ÷ (b/100)) \$ \_\_\_\_\_ (to 4 decimal places)
5. If no tax rate impact is anticipated due to an increase in assessed valuation and/or debt retirement provide a schedule indicating the unit's estimates for the term of the loan.
6. Prior to the determination by the Township Board to enter into this debt, was this issue and anticipated tax rate openly discussed at a public hearing? [ ] Yes [ ] No  
If yes, provide date(s) of public hearing: \_\_\_\_\_  
(Attach a copy of the proof of publication for the Notice of a Public Hearing)
7. Attach any brochures or newspaper articles regarding this debt.
8. What is the total tax rate for the district (including schools, county, etc.)? (This information can be found on the DLGF's website using this link: [http://www.in.gov/dlqf/pdfs/2006\\_tax\\_rates\\_06092006.pdf](http://www.in.gov/dlqf/pdfs/2006_tax_rates_06092006.pdf))
9. What is the proposed tax rate increase as a percent of the districts total tax rate? \_\_\_\_\_ %  
(This is calculated by taking the results from question 4 part h) and dividing it by the rate in question 8)

**Current Debt Service**  
(Indicate all outstanding Debt Service)

Purpose	Annual Payment	Retirement Date	Remaining Balance
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Attach additional sheets as necessary

**Financial Data**

Fund	DLGF Approved Tax Rate* (line 16)	DLGF Approved Tax Levy* (line 17)	Approved Appropriations* (line 1)	January 1 <sup>st</sup> Cash Balance*	Encumbrances Carried Forward from 2006
General	\$	\$	\$	\$	\$
Township Assistance	\$	\$	\$	\$	\$
Fire	\$	\$	\$	\$	\$
Cumulative Fire	\$	\$	\$	\$	\$
Debt Service	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$

\*Information must indicate those amounts approved by the Department of Local Government Finance

**History of Emergency Loans**

(For the past four (4) year period, indicate the amount of Emergency Loans approved)

Year	Amount	Purpose	Emergency Loan Tax Rate
2003	\$		
2004	\$		
2005	\$		
2006	\$		

**EMERGENCY LOAN CALCULATION**

January 1 <sup>st</sup> Current Year Cash Balance	
Plus: Current Year Certified Tax Levy (line 16)	
Plus: Estimated Current Year Revenues	
Total Funds Available for Current Year	
Less: Encumbered Appropriations from Prior Year	
Less: Estimated Current Year Expenditures	
Funds Remaining* (must be negative to qualify for a loan)	
Advertised Current Year Budget	
Adopted Current Year Budget	
DLGF Certified Budget Appropriations	

\*A negative amount in "Funds Remaining" indicates that a loan is necessary to fund the current year's budget. A positive amount indicates that no loan is necessary.

### Emergency Loans for Township Assistance

(Complete this section only if the emergency is for township assistance relief)

1. Has the Township adopted assistance standards? ☐ Yes ☐ No  
If yes, please attach a copy of the standards.

2. Do you work with recipients to help them find employment? ☐ Yes ☐ No

3. Do you require them to be on a work program? ☐ Yes ☐ No

4. What is the average time frame a recipient requires assistance? \_\_\_\_\_

5. Please give details of the circumstances requiring an emergency loan:

6. Please complete the following historical data table for the township assistance fund only.

	2002	2003	2004	2005	2006	2007**
Budget (line 1)*						
Levy (line 16)*						
Rate (line 17)*						
Actual Expenditures						

\* The Budget, Levy and Rate can be found on the fund report submitted with the 1782 Notice by the DLGF

\*\* Use year to date (YTD) actual expenditure for 2007 YTD as of the month of \_\_\_\_\_

**Emergency Loans for Fire Protection**

(Complete this section only if the emergency is for fire protection)

1. If the emergency is for contractual purposes, was the establishment of a Fire Protection District or Fire Territory considered as an alternative method to providing fire protection to the township?

[ ] Yes [ ] No

2. If fire protection is provided wholly or partially by Volunteer departments, complete the following:

Department Name	Current Contract Amount	Last Year's Contract Amount
	\$	\$
	\$	\$
	\$	\$

3. Department Personnel (Type and Number)

Type	Current Year #	Last Year #
Full-time Firefighters		
Volunteers		

4. Is the emergency based upon the Township's inability to fund full-time firefighter's personal services budget?

[ ] Yes [ ] No

(If Yes, complete the following)

- (a) Current year DLGF approved Personal Services amount \$ \_\_\_\_\_
- (b) Last year Personal Services appropriations (including additional appropriations) \$ \_\_\_\_\_
- (c) Amount adopted by Fiscal Body for current year \$ \_\_\_\_\_
- (d) What percent salary increase did the Fiscal Body approve? \_\_\_\_\_ %
- (e) Do firefighters contribute to a health insurance plan? (Y) (N)
- (f) If yes, what percent? \_\_\_\_\_ %

5. Has the Township applied for a firefighting services appeal within the last three (3) years? (Y) (N)

a) If so, was the appeal granted? (Y) (N)

b) Appeal Amount: \_\_\_\_\_

6. Is it the township's purpose to borrow for three consecutive years in order to appeal for a permanent increase to their maximum levy? (Y) (N)

If "Yes", is this the \_\_\_\_\_ first \_\_\_\_\_ second or \_\_\_\_\_ third year in the cycle?

### Required Documentation

The following information is required to be attached to this document.  
This document and supporting information must be filed with the Department of Local Government Finance on or before the "Information Due Date" as indicated below

Indicate by a [✓] documentation attached

- ☐ Resolution or Special Order of the Township Board authorizing the debt
- ☐ Proofs of publication of the Public Hearing
- ☐ Proofs of publication of Notice of Determination to Taxpayers to Incur a Debt
- ☐ County Auditor's Certificate of No Remonstrance
- ☐ Amortization Schedule for term of debt indicating semi-annual payments
- ☐ Eight (8) copies of the Hearing Information Sheet and above supporting documentation

### Notice

To obtain a debt service rate for the ensuing budget year, the unit must comply with the provisions of IC 6-1.1-17-3 for the ensuing year budget. In addition, on or before December 31 of the current year, the unit must execute the debt and file with the Department of Local Government Finance a final amortization schedule.

### Certification

I certify to the best of my knowledge and belief that the above is a full, true and complete disclosure for the proposed project(s) to be presented to the Local Government Tax Control Board and Department of Local Government Finance.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

### LISTING OF PROFESSIONALS INVOLVED IN THIS PROJECT

(The Department of Local Government Finance Order will only be mailed to the Unit Fiscal Officer and faxed to the Bond Counsel.)

#### Unit Fiscal Officer (Trustee)

Name		
Address		
Phone Number		
Fax Number		
E-Mail Address		
Date of Written Contract		
Is Fee Percentage Based	<input type="checkbox"/> Yes	

#### Bond Counsel

Name		
Address		
Phone Number		
Fax Number		
E-Mail Address		
Date of Written Contract		
Is Fee Percentage Based	<input type="checkbox"/> Yes	

#### Financial Advisor

Name		
Address		
Phone Number		
Fax Number		
E-Mail Address		
Date of Written Contract		
Is Fee Percentage Based	<input type="checkbox"/> Yes	

#### Attorney

Name		
Address		
Phone Number		
Fax Number		
E-Mail Address		
Date of Written Contract		
Is Fee Percentage Based	<input type="checkbox"/> Yes	

#### Other

Name		
Address		
Phone Number		
Fax Number		
E-Mail Address		
Date of Written Contract		
Is Fee Percentage Based	<input type="checkbox"/> Yes	